PTO/SB/06 (07-06)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

| PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 | | | | | | | Application or Docket Number 10/518,128 | | | ling Date 29/2005 | To be Mailed | |
|--|---|---|---------------------------------------|---|------------------|---|--|---|----|-----------------------|------------------------|--|
| APPLICATION AS FILED – PART I | | | | | | | | | | | HER THAN | |
| ⊢ | | | (Column 1) NUMBER FILED | | (Column 2) | | | ENTITY 🗌 | OR | | ALL ENTITY | |
| ┝ | FOR BASIC FEE | N | | .ED NUI | NUMBER EXTRA | | RATE (\$) | FEE (\$) | ł | RATE (\$) | FEE (\$) | |
| Ľ | (37 CFR 1.16(a), (b), | or (c)) | N/A | | N/A | | N/A | | 1 | N/A | | |
| Ш | SEARCH FEE (37 CFR 1.16(k), (i), | or (m)) | N/A | | N/A | | N/A | | | N/A | | |
| | EXAMINATION FE (37 CFR 1.16(o), (p), | | N/A | | N/A | | N/A | |] | N/A | | |
| (37 | TAL CLAIMS CFR 1.16(i)) | | minus 20 = * | | • | | x \$ = | | OR | x s = | | |
| | EPENDENT CLAIM CFR 1.16(h)) | S | minus 3 = * | | | 1 | x \$ = | | 1 | x \$ = | | |
| | APPLICATION SIZE (37 CFR 1.16(s)) | FEE shee is \$2 addit | ts of pape 50 (\$125 ional 50 s | gs exceed 100 in size fee due for each in thereof. See CFR 1.16(s). | | | | | | | | |
| | MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j)) | | | | | | | | 1 | | | |
| * If | * If the difference in column 1 is less than zero, enter "0" in column 2. | | | | | | | |] | TOTAL | | |
| APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | | OTHER THAN SMALL ENTITY OR SMALL ENTITY | | | | |
| AMENDMENT | 12/19/2007 | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | RATE (\$) | ADDITIONAL FEE (\$) | | RATE (\$) | ADDITIONAL FEE (\$) | |
| | Total (37 CFR 1.16()) | · 19 | Minus | 20 | = 0 |] | x \$ = | | OR | X \$50= | 0 | |
| | Independent (37 CFR 1,16(h)) | • 1 | Minus | 3 | = 0 |] | x \$ = | | OR | X \$210= | 0 | |
| | Application Size Fee (37 CFR 1.16(s)) | | | | | | | | | | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) | | | | | | | | OR | | | |
| _ | | | | | | | TOTAL ADD'L FEE | | OR | TOTAL ADD'L FEE | 0 | |
| | | (Column 1) | | (Column 2) | (Column 3) | | | | | | | |
| AMENDMENT | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | RATE (\$) | ADDITIONAL FEE (\$) | | RATE (\$) | ADDITIONAL FEE (\$) | |
| | Total (37 CFR 1,16(i)) | | Minus | ** | = |] | x \$ = | | OR | x s = | | |
| Δ | Independent (37 CFR 1,16(h)) | * | Minus | *** | = |] | x \$ = | | OR | x \$ = | | |
| | Application Size Fee (37 CFR 1.16(s)) | | | | |] | | | 1 | | | |
| ΑN | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) | | | | | | | | OR | | | |
| | | | | | | | TOTAL ADD'L FEE | | OR | TOTAL ADD'L FEE | | |
| "If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | |

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is 16 lie (and by the USPTO to process) an application. Confidentiality is governed by 83 USS. C.12 and 37 CFR 1.14. This collection is estimated to bette 21 rainutes to confine including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burdon, should be sent to the Chief information Officer. U.S. Patent and Trademark Office, U.S. Department of Commorce, P.O. Box 1450, Alexandria, VA 2213-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.